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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/404,440 08/19/2002 *D**yes*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *D**None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/30/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MN	5	53	5
Verified and Acknowledged	<i>TP</i> Examiner's Signature <i>D</i> Initials				

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## TITLE

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